

REVIEWS OF BOOKS.

SURGICAL ANATOMY: A TREATISE ON HUMAN ANATOMY IN ITS APPLICATION TO THE PRACTICE OF MEDICINE AND SURGERY. By JOHN B. DEEVER, M.D. Vol. ii. Philadelphia: P. Blakiston's Son & Co., 1900.

If one takes up this work with the expectation of finding an exhaustive treatise on anatomy or the results of original research, disappointment will follow. There are few descriptions of aberrant vessels, muscular anomalies, nothing but plain every-day anatomy for the physician and surgeon, so that the title of the work is justified. In no respect does the second volume fall behind its predecessor. The plates, lavishly profuse, are executed in the best manner, and are admirably fitted to teach the subjects which they are designed to illustrate.

There are two ways in which anatomy may be learned, first by rote from written text. This is the old method, most exhausting and unsatisfactory, requiring a pure effort of memory, an act of main strength, something like memorizing a column of the dictionary. Such knowledge is always evanescent, and the student who pursues this course is lucky if he retains his facts long enough to pass the college and State examinations. This is a legacy of the days of body-snatching, when laboratory material was scarce and often obtained only through personal peril. With the establishment of liberal and enlightened laws, however, the great medical schools have been quick to see the faults of the old method, and have appreciated the fact that the only way for the student to grasp and retain the intricate mass of detail in human anatomy is by an acquaintance with the structures themselves.

No engineer ever gained fitness to drive a locomotive by reading and committing to memory pages of description of its machinery, but rather by long experience with the parts themselves, acquired in the round-honse and from the fireman's side of the cab. No amount of reading can ever compensate for the knowledge gained by personal contact and observation. To an Esquimaux who had never seen a horse, one glance at the animal would impress its characteristics on the mind where pages of written description would fail. We have taught anatomy in the schools too long in the hardest way and in a fashion opposed to common sense. Quiz compends and quiz masters, crams and crammers; these have been the resources of school and scholar. Happily, the days of the didactic lecture on anatomy are numbered, and men are no longer expected *vi et armis* to memorize pages of Grey. Laboratory teaching and dissection in small classes is rapidly superseding the old fashion. There will always, however, be natural and insuperable limitations to the freest use of this method. Even in the largest cities there will be a chronic scarcity of material. There will be insufficient room in the college, and the lengthened course of four years at most admits of but a few hours a week in the laboratories for a portion of two years. At present a student sees the same part just twice. What familiarity with the locomotive should we expect of the engineer under like circumstances?

It is just here where a book like this work of Dr. Deaver's finds its proper sphere. Its descriptive pages are altogether secondary to the illustrations. These are so clear and of such a size that the student by a careful study of the plates can familiarize himself with the structures under consideration in a manner second only to an actual dissection. Thus, when he begins his first dissection, he will have a clear picture in his mind of what he is to find on the cadaver, and after he has finished his final dissection he has at hand a vivid picture of that which he saw in the dissecting-room. The next best thing to seeing the horse for the

Esquimaux is to see an accurate picture. Description comes afterwards to elucidate and particularize. The value of these plates would have been enhanced if the scale on which each plate is drawn had been indicated. As it is, there is no sort of uniformity, and too often there is quite needless exaggeration of structure, beyond the needs of clearness.

An instance of this needless want of uniformity may be seen in Plates cxciii and cxciv, both plates in which the auricle figures. In the first, the auricle measures three inches in length; in the second, five inches and a half. Both plates could have been drawn to the same scale with obvious advantage. The same fault is exhibited in Plate cxxxxiii, where in the upper figure the fourth nerve is depicted as being one-half an inch in its longest diameter, whereas in the lower figure on the same page it is but one-quarter of an inch. The exaggeration in size seems a misfortune, not to speak of the constantly changing scale, of which no indication is given; neither do the requirements of clearness demand even in a schematic drawing such wide variations between similar drawings or from nature. The illustrations of the anatomy of the neck are clear and good. One is a little surprised to find the author stating that it is often advisable in cases of dyspnoea to incise the cricothyroid membrane, the lower operation, if necessary, to be done when the patient has quieted after relief of the dyspnoea. It is difficult to see the reason for making two incisions for a tracheotomy, especially as every surgeon knows that the turgescence of the veins subsides instantly after the trachea is opened. The difficulties of the operation seem to have been a little exaggerated. In speaking of the internal jugular, the subclavian and innominate veins, the author rather naïvely remarks that, if division is necessary, it is best to ligate them before severing them. We fear that the surgeon who neglects this advice will have little occasion to tie them afterwards. The statement is made that the sternomastoid muscle is the guide

to the subclavian artery. We had always supposed that the *scalemus anticus* was the guide, rather than the *sternomastoid*.

Plate CLXXXVII is misleading, and calculated to deceive a novice as to the depth at which the subclavian artery is placed. In the figure it is made to appear superficial. Under the subject of the larynx, the author speaks perhaps a little too disparagingly of the operation of laryngectomy, for under improved technique the mortality has decidedly diminished. The organs of special sense are well illustrated, the drawings of the eye being especially fine. One or two points may be mentioned, as, for instance, in Plate CCXXXIV, where the attachment of the four recti muscles is figured as equally distant from the scleroconal junction. This is very far from being the case. Commencing with the internus, they are respectively at a distance of five, six, seven, and eight millimetres, their insertions thus being along a spiral line (Motaïs, Panas). Plate CCXLIV represents the fundus of the eye, but the vessels are both too numerous and much too tortuous. The macula lutea is much exaggerated. In Plate CCLII, which is a view of the auditory ossicles *in situ*, the lower end of the long process of the incus is shown as coming as low down in the tympanic cavity as the lower end of the manubrium mallei. This is a mistake. The plates on the brain follow and are of unequalled clearness, and for teaching purposes have never been excelled. A student, by a careful study of these plates, taking them in series, can gain a better knowledge of the brain than by reading pages of mere description. A description of the male and female perineum closes the volume. The author and publishers are to be congratulated on a worthy achievement. The work will prove of value not only to the student, but to the general practitioner and the surgeon, particularly the man who has been denied the experience of a demonstratorship in the dissecting-room.

ALGERNON T. BRISTOW.

A TREATISE ON APPENDICITIS. By JOHN B. DEAVER, M.D. Second edition, thoroughly revised and considerably enlarged. Philadelphia: P. Blakiston's Son & Co., 1900.

The first edition of this book appeared in 1896, and was reviewed in the *ANNALS* for August of that year. A revised edition now appears after a lapse of four years, and the reviewer naturally is led to a comparison. At the time of the appearance of the first edition, this Journal felt obliged to call attention to the appropriation in the text, without the use of quotation marks, of certain passages from Talamon, Hawkins, and McBurney. It is with regret that we note that the author has made no change in the passages complained of, and has left out altogether his account of McBurney's description of the intermuscular operation. Indeed, the only reference to this standard procedure is misleading, for the author says that it is appropriate only in cases unassociated with pus. Surgeons who are accustomed to this method of operating will not agree with Dr. Deaver in this statement. Moreover, in the first edition of his book he states that the opening may be made larger by continuing the separation of the fibres of the internal oblique. It is much to be regretted that the full and clear directions given in the first edition for McBurney's intermuscular operation, as well as for the simple incision, have been altogether omitted in the present edition. Hospital surgeons will value this book as a work of reference, and if these were the only men the author desired to reach, minute descriptions of operative technique might well be omitted; but works of this character are of the greatest use more particularly to the occasional operator and the young surgeon, and for them the clear instructions and illustrations of the first edition will be missed. The new chapter on the pathology of appendicitis written by Dr. A. O. J. Kelly is a valuable contribution, and the best article on the subject that has appeared in any of the monographs. The various theories are discussed with temperate and judicial

mind, and the writer is to be congratulated for a very thorough and scientific exposition of the subject. In the chapter on Symptomatology a statement is made which ought to be in the hands of every general practitioner, "a sudden fall of temperature to normal or subnormal by no means warrants a favorable prognosis." More than a few men have been led to a feeling of fancied security by a contrary opinion and lost their patient as a result. This chapter and the one following on Differential Diagnosis show the fruits of ripe experience and sound judgment, and make the book even more valuable to the general practitioner than to the surgeon who is familiar with the various manifestations of the disease. It is perhaps putting the matter a little strongly to say that flexion of the thigh is invariably a symptom of appendicitis. It often happens, particularly when the appendix is in this position, but it is far from being invariably a symptom. Similarly, exception may be taken to the assertion that the pulse bears no relation to the gravity of the disease; for, while it is true that exceptionally one sees cases with a pulse rate below ninety, which are nevertheless dangerous and require immediate operation, it is equally true that the cases in which the pulse exceeds one hundred are uniformly threatening and dangerous in proportion to the elevation of the pulse above this mark. As a matter of fact, however, the man who places implicit reliance on any one symptom will often be at fault, and this Dr. Deaver makes sufficiently clear. All surgeons will not agree with the author in his views regarding the propriety of removing the appendix in suppurative cases, even though it form part of the limiting wall of the abscess. He says that this can be done in skilful hands with comparative safety. Comparative to what? To the danger of leaving it? As far as the immediate prospects of the patient are concerned, there is not only no danger in leaving it, but greater safety, as the author's use of the word comparative implies. Now, with reference to the danger of future recurrence, the author's own statistics on a basis of 4500 cases

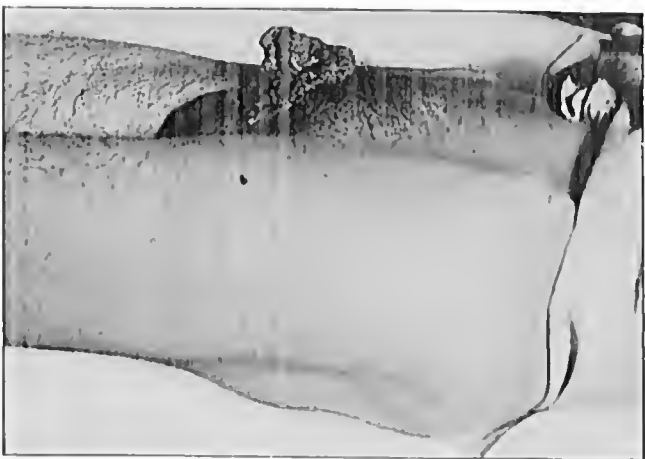


FIG. 1.—Extensive cancer of penis and scrotum.



FIG. 2.—Condition eight months after operation.

show that the patient has eighty chances out of a hundred of escaping recurrence. Moreover, it must be shown that it is safer to pursue the search for the appendix in the presence of more or less virulent pus amidst much broken-down tissue, even with the protection of ample gauze barriers, than to go for the same appendix a week or two later when the wound has become relatively clean, the sloughs discharged, and protective granulations formed. Such a wound is easily disinfected, which is not the case with the original abscess cavity. The author is very properly cautious when he advises the occasional operator to be content with evacuating the pus. Many surgeons of wide experience will be equally cautious in their attempts to remove an appendix under such circumstances. Differences of opinion, of course, will always occur, due largely to the personal equation and the point of view. No one, however, can read this book, whether to agree or disagree, without profit.

ALGERNON T. BRISTOW.

SURGERY: ITS THEORY AND PRACTICE. By WILLIAM JOHNSON WALSHAM, F.R.C.S., M.B. With 483 Illustrations and 16 Skiagram Plates. Seventh edition. Philadelphia: P. Blakiston's Son & Co., 1900.

Walsham's seventh edition on "Theory and Practice of Surgery" may be considered as a good example of the numerous compends intended particularly for a hasty, general review of the entire field of surgery. The subject-matter has necessarily been greatly condensed, and brevity in several instances is too pronounced a feature; but the author has nevertheless succeeded in presenting the cardinal principles of general surgery in an interesting and instructive manner.

The entire book has been revised and matters obsolete have for the most part been omitted.

The first two sections are given to pathological considerations of surgical injuries and diseases, and include descriptions of tuber-

culosis, syphilis, tumors, and diseases which are the result of infective processes in wounds.

The third and fourth sections comprise injuries and diseases of special tissues, and here the general considerations of fractures and dislocations are presented.

In section five, which is devoted to injuries of regions, special fractures and dislocations receive careful attention, and these chapters represent one of the most notable features of the book. Some very clear skiagrams serve to illustrate the various deformities and most common sites of fracture.

Section six includes the diseases of regions, and here the chapters on diseases of the brain, abdomen, and genito-urinary organs are the most noteworthy. In these the surgical teachings represent, with few exceptions, the most generally accepted methods of diagnosis and treatment of the present time.

The chapters on diseases of the eye and ear have been contributed by men of special aptitude in these branches.

WALTER A. SHERWOOD.

ON NEUROMA AND NEUROFIBROMATOSIS. By ALEXIS THOMSON, M.D., F.R.C.S.E. Quarto, x, 168 pp., with twenty Plates. Edinburgh: Turnbull & Spears.

The author of this work has undoubtedly had an extensive experience in a branch of neural surgery which, to the average surgeon of the present time, is comparatively rare. He treats of the neuromata as true and false varieties.

Of the neuroma vera, which is by far the more uncommon variety, he gives a description of the few cases which have been recorded, and limits this form to those tumors in which newly formed nerve tissue is the essential element. They may be circumscribed or diffuse, and their location is most commonly in some portion of the sympathetic system. The diagnosis is always attended with difficulty, and their removal can be advised only when causing an unsightly deformity or when interfering with the functions of adjacent structures.

In his classification of the false neuromata, the author recognizes and describes the following types:

I. Circumscribed; II. Diffuse (generalized Neurofibromatosis); III. Traumatic or Stump Neuromata.

In each of these fibrous connective tissue enters chiefly into their structure.

The chain of clinical symptoms is particularly interesting.

A close relationship between pigmented mole of the skin, elephantiasis nervarum, and sarcoma of nerve origin is demonstrated, and hence the importance of early radical measures in a suspicious case.

The operative treatment of the benign growths yields very good results, especially in the circumscribed tumor. The amount of after-disturbance to the nerve function is surprisingly small.

The stump neuromata, which since the days of aseptic surgery is much more rare than formerly, is regarded as pathological only when causing pain or interfering with function. It seldom attains great size, and otherwise may be regarded in a similar light to bony callus following fracture.

This book is a valuable contribution to surgical literature. It is written in a clear, pleasing style, and its pages are interspersed with numerous good plates and the histories of many illustrative cases which have been under the author's personal observation.

WALTER A. SHERWOOD.